2003 FOR PROFIT CORPORATION

UNIFORM BUSINESS REPORT (UBR) P94000086348

1. Entity Name

DOCUMENT #

KENDALL GOLF MANAGEMENT, INC.



FILED Apr 07, 2003 8:00 am Secretary of State

04-07-2003 90965 042 ***150.00

						OUD WE							
Principal Plac	e of Business			illing Address 30 LBJ FREEWAY									
SUITE 350				SUITE 350									
DALLAS TX 75234				DALLAS TX 75234					 	14fil 8830 AS		 111 0 a 31111 a	
UNLLAG IN IS	J234			LEAG 1X 70204									
2. Principal Place of Business				3. Mailing Address				11111111	II JEO FORM DIDIR	FO 103 O FO40 O O		uriou iriii i	[88 8 488
Suite, Apt. #, etc.				Suite opt. #, etc. # 1140 % DEBSIE THA				er	СП СНЕСК	HERE IF (MAKING (HANGES	
City & State			C	City & State			4. FEI Number			9192			oplied For ot Applicable
Zip		Country	Z	(ip	Coun	itry	5.	. Certificate	of Status De	sired		8.75 Added Require	
	6. Name	and Address o	f Current Regist	ered Agent	•		7.	. Name and	Address of	New Regi	stered Ag	ent	
CORDODA	ATION CEDY	ICE COMPAN	ıv			- Name							
CORPORATION SERVICE COMPANY 1201 HAYS STREET					Street Address (P.O. Box Number is Not Acceptable)								
TALLAHASSEE FL 32301-2525													
						City					FL	Zip Cod	e
			atement for the p	urpose of changing it	s register	ed office or r	registered a	agent, or bot	h, in the Stat	e of Florida	a. I am far	niliar with,	and accept
the obligat	tions of registe	ered agent.											
SIGNATURE .		or printed name of reg	ristered agent and title if	applicable. (NO	TE: Registere	d Agent signatur	e required wher	n reinstating)			DATE		
F	ILE NOW!!	! FEE IS \$15	50.00					0.51-	etien Compo	ian Ciona	nina	фE 0	····
		3 Fee will be Florida Depa	\$550.00 irtment of State	,					ection Campa est Fund Con	•			0 May Be d to Fees
10.		OFFIC	ERS AND DIREC	TORS	11.		1	ADDITIONS/	CHANGES T	O OFFICE	RS AND D	IRECTOR	S IN 11
TITLE	P			☐ Delete	TITL	E]	Change	☐ Addition
NAME	HOWE, DO	UGLAS			NAM	E							
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CITY-ST-ZIP	<u> </u>				CITY	-ST-ZIP							
12. I hereby of indicated	certify that the	information sup t or supplement	pplied with this fili al report is true a	ing does not qualify fond accurate and that	or the exe my signa	mption state ture shall ha	d in Sectio	on 119.07(3)(ne legal effec	i), Florida Sta t as if made	itutes. I fui under oath	ther certify	that the i an officer	nformation or director
of the cor	rporation or th	e receiver or tru	istee empowered	to execute this repor other like empowered	t as requi	red by Chap	iter 607, Flo	orida Statute	s; and that m	y name as	opears in E	Block 10 o	Block 11 if

SIGNATURE: